



Patent  
Attorney's Docket No. 017750-546

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of )  
Randall J. MURAVEZ ) Group Art Unit: 3662  
Application No.: 09/955,151 ) Examiner: B. Gregory  
Filed: September 19, 2001 ) Confirmation No.: 8307  
For: SYSTEM AND METHOD FOR )  
PERIODICALLY ADAPTIVE )  
GUIDANCE AND CONTROL )

AMENDMENT/REPLY TRANSMITTAL LETTER

Assistant Commissioner for Patents  
Washington, D.C. 20231

RECEIVED  
OCT 04 2002  
GROUP 3600

Sir:

Enclosed is a reply for the above-identified patent application.

- ☐ A Petition for Extension of Time is also enclosed.
- ☐ A Terminal Disclaimer and a check for ☐ \$55.00 (2814) ☐ \$110.00 (1814) to cover the requisite Government fee are also enclosed.
- ☒ Also enclosed is a Request for Approval of Drawing Changes
- ☐ Small entity status is hereby claimed.
- ☐ Applicant(s) request continued examination under 37 C.F.R. § 1.114 and enclose the ☐ \$370.00 (2801) ☐ \$740.00 (1801) fee due under 37 C.F.R. § 1.17(e).
- ☐ Applicant(s) previously submitted \_\_, on \_\_, for which continued examination is requested.
- ☐ Applicant(s) request suspension of action by the Office until at least \_\_, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.
- ☐ A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (146/246) is also enclosed.
- ☒ No additional claim fee is required.

☐ An additional claim fee is required, and is calculated as shown below:

A M E N D E D   C L A I M S					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims	26	MINUS 26=	-0-	× \$18.00 (1202) =	-0-
Independent Claims	4	MINUS 4 =	-0-	× \$84.00 (1201) =	-0-
If Amendment adds multiple dependent claims, add \$280.00 (1203)					-0-
Total Amendment Fee					-0-
If small entity status is claimed, subtract 50% of Total Amendment Fee					-0-
<b>TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT</b>					-0-

☐ A claim fee in the amount of \$\_\_\_\_\_ is enclosed.

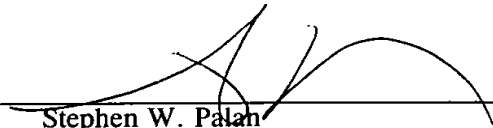
☐ Charge \$\_\_\_\_\_ to Deposit Account No. 02-4800.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

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By:

  
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